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**United States Bankruptcy Court**  
of the  
**Northern District Of Illinois**  
**Western Division**

## Trustee's Final Report

In Re: JAMES F. WESTAWAY & LAURETTE K. WESTAWAY Case Number: 07-70908  
29129 GLIDDEN ROAD SSN-xxx-xx-2848 & xxx-xx-0804  
KINGSTON, IL 60145

Case filed on: 4/17/2007  
Plan Confirmed on: 7/13/2007

C Converted to Chapter 7

Total funds received and disbursed pursuant to the plan: \$4,147.00

Detail of Disbursements below:

Claim #	Name of the Claimant	Claimed by the Creditor	Allowed by the Court	Principal Paid	Interest Paid
000	ATTORNEY JACQUELINE MONTVILLE	3,000.00	3,000.00	2,065.13	0.00
	Total Legal	3,000.00	3,000.00	2,065.13	0.00
998	JAMES F. WESTAWAY	0.00	0.00	0.00	0.00
	Total Debtor Refund	0.00	0.00	0.00	0.00
001	COUNTRYWIDE HOME LOANS	0.00	0.00	0.00	0.00
002	COUNTRYWIDE HOME LOANS	0.00	0.00	0.00	0.00
003	GMAC	7,755.44	7,755.44	1,553.70	203.33
	Total Secured	7,755.44	7,755.44	1,553.70	203.33
004	AMERICAN EXPRESS CENTURION BANK	10,930.83	10,930.83	20.01	0.00
005	AMEX	0.00	0.00	0.00	0.00
006	AMERICAN EXPRESS TRAVEL RELATED SERVICES	9,135.92	9,135.92	16.71	0.00
007	AMERICAN EXPRESS CENTURION BANK	421.99	421.99	0.00	0.00
008	JEFFERSON CAPITAL SYSTEMS, LLC	4,265.86	4,265.86	0.00	0.00
009	ASSOCIATED PATHOLOGY CONSULTANTS	0.00	0.00	0.00	0.00
010	ATG CREDIT, LLC	0.00	0.00	0.00	0.00
011	ECAST SETTLEMENT CORPORATION	5,186.74	5,186.74	0.00	0.00
012	CAPITAL ONE BANK	0.00	0.00	0.00	0.00
013	CENTRAL DUPAGE HOSPITAL	0.00	0.00	0.00	0.00
014	CERTIFIED SERVICES	0.00	0.00	0.00	0.00
015	CITICARDS	0.00	0.00	0.00	0.00
016	CITICARDS	0.00	0.00	0.00	0.00
017	COMPUTER CREDIT INC.	0.00	0.00	0.00	0.00
018	DEKALB CLINIC CHARTERED	162.63	162.63	0.00	0.00
019	ELMHURST MEMORIAL HEALTHCARE	0.00	0.00	0.00	0.00
020	EQUIFAX	0.00	0.00	0.00	0.00
021	EXPERIAN	0.00	0.00	0.00	0.00
022	FIRST USA BANK	0.00	0.00	0.00	0.00
023	GEMB / CC COSMETICS NONCER	0.00	0.00	0.00	0.00
024	H & R ACCOUNTS	0.00	0.00	0.00	0.00
025	HAUSER - ROSS EYE INSTITUTE	0.00	0.00	0.00	0.00
026	KISHWAUKEE COMMUNITY HOSPITAL	0.00	0.00	0.00	0.00
027	KISHWAUKEE COMMUNITY HOSPITAL	0.00	0.00	0.00	0.00
028	LOYOLA UNIVERSITY MEDICAL CENTER	0.00	0.00	0.00	0.00
029	LOYOLA UNIVERSITY MEDICAL CENTER	0.00	0.00	0.00	0.00
030	MERCHANTS CREDIT GUIDE	0.00	0.00	0.00	0.00
031	MIDWEST HEART SPECIALISTS	1,120.28	1,120.28	0.00	0.00
032	MIDWEST HEART SPECIALISTS	0.00	0.00	0.00	0.00
033	MIDWEST HEART SPECIALISTS	0.00	0.00	0.00	0.00
034	NATIONWIDE CREDIT & COLL	0.00	0.00	0.00	0.00
035	NATIONWIDE CREDIT & COLLECTION INC	0.00	0.00	0.00	0.00
036	NCAC	0.00	0.00	0.00	0.00
037	NORTHWEST COLLECTIONS INC.	0.00	0.00	0.00	0.00
038	NUERO HOSPITAL 1ST, SC	0.00	0.00	0.00	0.00
039	RIDGE AMBULANCE SERVICE	0.00	0.00	0.00	0.00
040	ROUNDUP FUNDING LLC	4,693.11	4,693.11	0.00	0.00
041	SPIEGEL	0.00	0.00	0.00	0.00
042	TOTAL CREDIT RECOVERY	0.00	0.00	0.00	0.00
043	TRANSUNION	0.00	0.00	0.00	0.00
044	VAN RU CREDIT CORP	0.00	0.00	0.00	0.00
045	WORLD FINANCIAL NETWORK NATIONAL BANK	257.33	257.33	0.00	0.00
046	WORLD FINANCIAL NETWORK NATIONAL BANK	350.82	350.82	0.00	0.00
	Total Unsecured	36,525.51	36,525.51	36.72	0.00
	Grand Total:	47,280.95	47,280.95	3,655.55	203.33

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Total Paid Claimant: \$3,858.88  
Trustee Allowance: \$288.12  
Percent Paid Unsecured: 0.10

Wherefore, your petitioner prays that a final Decree be entered discharging the trustee and the trustee's surety from any and all liability on account of the within proceedings, and closing the estate, and for such other relief as is just. Pursuant to FRBP, I hereby certify that the subject case has been fully administered.

Report Dated:

/s/ Lydia S. Meyer  
Lydia S. Meyer, Trustee

This is to certify that a copy of this notice has been mailed to the debtor and the debtor's attorney.

Dated at Rockford, IL on 08/28/2008

By /s/Heather M. Fagan